

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	E.H.		05-02-01
O.I.P.E. CLASSIFIER		48	5/21/01
FORMALITY REVIEW	MJK	T-569	6/26/01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	
Original	
1	4/15/01
2	4/15/01
3	4/15/01
4	4/15/01
5	4/15/01
6	4/15/01
7	4/15/01
8	N N
9	N N
10	N N
11	N N
12	N N
13	N N
14	N N
15	N N
16	N N
17	N N
18	N N
19	N N
20	N N
21	N N
22	N N
23	N N
24	N N
25	N N
26	N N
27	N N
28	✓ ✓
29	✓ ✓
30	✓ ✓
31	N N
32	N N
33	N N
34	N N
35	✓ ✓
36	✓ ✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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C.C.  
6-26-01